Table D-11. Evidence table for studies addressing management of PPH (Teofili 2014)

| **Study**  **Description** | **Intervention** | **Inclusion/Exclusion**  **Criteria & Population** | **Outcomes** |
| --- | --- | --- | --- |
| **Author:**  Teofili et al.,  201414  **Country:**  Italy  **Enrollment period:**  Jan 2005 to  Dec 2011  **Birth setting:**  Hospital  **Facility characteristics:**  Tertiary care,  **Funding:**  NR (Authors state no competing interests exist)  **Design:**  Case series, retrospective | **Intervention:** Transfusion  **Groups:**  **G1:** intervention  **N at enrollment:**  **G1:** 71  **N at follow-up:**  **G1:** 71  **Duration of treatment:** NR  **Timing of treatment:** NR  **Order of treatment:** NR  **Length of follow-up:** NR | **Operational definition of PPH:** NR  Definition of success of treatment: NR  **Method of blood loss measurement:** NR  **Severity:** NR  **Inclusion criteria:**  patients receiving at least 3 units of blood within in 24 hours after delivery  **Exclusion criteria:** NR  **Maternal age, yrs, mean ± SD:**  **G1:** 34 ± 5.5  **Parity, n:** NR  **Weeks gestation, n (%):** NR  **Single pregnancy, n (%):** NR  **Multiple pregnancy, n (%):** NR  **Race/ethnicity:** NR  **BMI:** NR  **Baseline hemoglobin:** NR  **SES:** NR  **Mode of birth, %:**  Vaginal  **G1:** 21  Cesarean  **G1:** 79 **Risk factors, n (%):**  Pregnancy associated hypertensive disorders  **G1:** 8 (11.3)  Preexisting morbidities  **G1:** 21 (29.6)  **Primary etiology of PPH, n (%):** NR | **Harms pre-specified:** No  **Harms, n (%):**  Transfusion-related acute lung injury (TRALI), including possible TRALI (defined as new onset hypoxemia within 6 hours after transfusion, with bilateral pulmonary changes, in absence of cardiogenic pulmonary edema) n:  **G1:** 14  Transfusion-associated circulatory overload (TACO) (d in above count)  **G1:** 1 |